POSITION	INITIALS	וס אס.	DATE
FEE DETERMINATION	5.2		11-28-0
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	RIB	1078	12/07/0
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

	Delegand.	NI.	 Non-elected
~	Rejected		
	Allowed		
_	(Through numeral) Canceled		
	Restricted	0	 Objected

Claim	Date	Date Date	Claim Date
			3
Final Original S-3-02		Original	Pinal Original
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If more than 150 claims or 10 actions staple additional sheet here





